## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10807643

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
[ <del>-</del>	OTAL CLAIMS		(Column	(Column 1)		(Column 2)		TYPE [		OR -	SMALL		
TOTAL CLAIMS			27				.	RATE	FEE	_ `	RATE	. FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			→ minus 20= *			2		X\$ 9=	113	OR	X\$18=		
IND	DEPENDENT C	LAIMS .	minus 3 =		*			X43=		OR	X86=	·	
ML	JLTIPLE DEPEN	NDENT CLAIM P					+145=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	403	OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER	THAN	
(Column 1) (Column 2)						(Column 3)	٠.	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	CL AIM	=		X43=		OR	X86=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
								TOTAL ODIT. FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)												•	
AMENDMENT B		CLAIMS		HIGH	ST		] [		ADDI-	1		ADDI-	
		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	**	•	= .		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= .	T	X43=	<del></del> .	OR	X86=		
٩	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	TIPLE DEPENDENT CLAIM			▎┟	+145=					
									Î	OR	+290=	٠,	
	TOTAL ADDIT. FEE OR										TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	. [	
	Independent	*	Minus	***		=		X43=	-	00	X86=	T-	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
A Milho potacio poliumo d in topo theo the potacio poliumo O units and in poliumo O								+145=		OR	+290=	<u>.</u> .	
H	f the "Highest Nur	nber Previously Pai	id For IN THIS	S SPACE is	less than	20, enter "20."	· AI	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE		
		mber Previously Pa ber Previously Paid					r foun	d in the app	ropriate box	in <b>co</b> lu	ımn 1.		